

**MULTIPLE DEPENDENT  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)**

APPLICANT(S)

07/652694

**CLAIMS**

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.
TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.
TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.

	IND.		DEP.		IND.		DEP.	
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TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
TOTAL	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.

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